

Division of Health Care Finance and Policy

Fiscal Year 2001

**Outpatient Hospital
Observation Database
Documentation Manual**

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Division of Health Care Finance and Policy
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<http://www.mass.gov/dhcfp>

General Documentation
FY2001 Outpatient Hospital Observation Database

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I. Introduction

The Massachusetts Division of Health Care Finance and Policy began collecting Outpatient Observation Data in July 1997. The Division's collection of Outpatient Observation Data was in response to increasing migration of hospital care to the outpatient observation setting from the traditional inpatient setting. Outpatient Observation patients are observed, evaluated, and treated, if necessary, before they are safely discharged from the hospital.

The Outpatient Observation Data includes patients who receive outpatient observation services and are not admitted to the hospital. Outpatient Observation services is defined generally for reporting purposes in the Case Mix Regulation 114.1 CMR 17.02 as:

Observation services are those furnished on a hospital's premises which are reasonable and necessary to further evaluate the patient's condition and provide treatment to determine the need for possible admission to the hospital. These services include the use of a bed and periodic monitoring by a hospital's physician, nursing, and other staff.

This manual includes information to be used with the Outpatient Observation case mix data as specified in 114.1 CMR 17.08, Outpatient Observation Data Specifications. Information contained in this manual includes the data file specifications, standards the Division is using for checking the data, hospital verification responses concerning hospital reported data, and file structure descriptions. Also included is information on cautionary use data and calculated fields.

Regulations:

Copies of **Regulation 114.1 CMR 17.00: Requirement for the Submission of Hospital Case Mix and Charge Data** and **Regulation 114.1 CMR 2.00: Disclosure of Hospital Case Mix and Charge Data** may be obtained for a fee by faxing a request to the Division at (617) 727-7662. The Regulations also may be found at the Division's web site: <http://www.mass.gov/dhcfp>.

II. Compact Disk (CD) File Specification

1) Data Formats:

The Division has created the outpatient observation data set in three available formats:

- .DBF
- .MDB
- .TXT

2) File / Table Names:

OA01L#Q1
OA01L#Q2
OA01L#Q3
OA01L#Q4

Where '#' stands for the level of data requested.

3) 2001 Outpatient Observation Record Counts:

For Hospital Year 2001 the number of outpatient observation stays collected from Massachusetts hospitals for Quarters 1 – 4 totaled 135,054. The distribution by quarter is as follows:

Quarter 1	34,080	(N = 74 Hospitals Reporting)
Quarter 2	35,175	(N = 74 Hospitals Reporting)
Quarter 3	34,109	(N = 74 Hospitals Reporting)
Quarter 4	31,690	(N = 74 Hospitals Reporting)

4) Data Formats:

For a complete listing of database structure formats (.DBF, .MDB, and .TXT), please refer to the Appendices at the back of this manual.

III. Data Standards

Definition of Quarterly Reporting Periods

All Massachusetts acute care hospitals are required to file data that describes the case mix of their patients as well as the charges for services provided to their patients in accordance with Regulation 114.1 CMR 17.00. Hospitals report data to the Division on a quarterly basis. For the 2001 period, these quarterly reporting intervals were as follows:

Quarter 1:	October 1, 2000 – December 31, 2000
Quarter 2:	January 1, 2001 – March 31, 2001
Quarter 3:	April 1, 2001 – June 30, 2001
Quarter 4:	July 1, 2001 – September 30, 2001

III. Data Standards

Data Edits and Error Categories

Fiscal Year 2001 outpatient observation data was submitted by the hospitals 75 days after the close of each quarter. The required data elements were then edited using the corresponding edits as specified in ***Regulation 114.1 CMR 17.08: Outpatient Observation Data Specifications***.

The quarterly data is edited for compliance with regulatory requirements using a one percent error rate as specified in Regulation 114.1 CMR 17.08. The one percent error rate is based on the presence of type A and type B errors as follows:

Type A: One error per outpatient observation stays causes rejection of discharge.

Type B: Two errors per outpatient observation stay causes rejection of discharge.

If one percent or more of the discharges are rejected, then the entire data submission is rejected by the Division, and the hospital is informed that the submission failed the edit process. These edits primarily check for valid codes, correct formatting, and the presence of required data elements. Please see listing of data elements categorized by error type, which follows this section.

Each hospital receives a quarterly error report displaying invalid outpatient observation stay information. Quarterly data which does not meet the one percent compliance standard must be resubmitted by the individual hospital until the standard is met.

The Division strives to include data that has passed the one percent compliance standard in the data files we release to the public. When this is not possible, we include data which did not meet the 1% standard (i.e. failed the edits). Submissions which have failed are referred to as **Cautionary Submissions**. Observation stays within submissions that have failed the edit process are assigned a special flag, which indicates that the submission failed.

Please see the Cautionary Use Data section for further technical details.

III. Data Standards

Data Element Field Descriptions and Error Categories

The following are the required data elements that hospitals must report to the Division in accordance with the Case Mix Regulation 114.1 CMR 17.00, effective October 1, 1999. We have also included additional fields created by the Division. Each recipient of the outpatient observation data has been granted approval by the Division to receive a certain level of data. Please refer to Section III for a description of Data Levels I – VI, and to Section VIII to review the specific data elements contained in your data files. Please note that higher levels contain an increasing number of Deniable Data Elements.

In addition to the field names, the data description and error category for each field is listed below:

	Field Name:	Short Description:	Error Category:
1	Hos_ID	Hospital DPH number	A
2	MultiSiteN	Hospital's designated number for multiple sites merged under one DPH number	
3	Pt_ID	Unique Health Identification Number	A
4	MR_N	Patient's Medical Record number	A
5	Acct_N	Hospital billing number for the patient	A
6	MOSS	Mother's social security number for infants up to 1 year old	B
7	MCD_ID	Medicaid Claim Certificate Number	A
8	DOB	Patient's date of birth	A
9	Sex	Patient's sex	A
10	Race	Patient's race	B
11	Zip_Code	Patient's zip code	B

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III. Data Standards

Data Element Field Descriptions and Error Categories

	Field Name:	Short Description:	Error Category:
12	Ext_Zcode	Patient's 4 digit zip code extension	
13	Beg_Date	Patient's beginning service date	A
14	End_Date	Patient's ending service date	A
15	Obs_Time	Initial encounter time of day	B
16	Ser_Unit	Unit of Service is hours	A
17	Obs_Type	Patient's type of visit status	B
18	Obs_1Srce	Originating, referring, or transferring source for Observation Visit	B
19	Obs_2Srce	Secondary referring or transferring source for Observation visit	B
20	Dep_Stat	Patient's departure status	A
21	Payr_Pri	Patient's primary source of payment	A
22	Payr_Sec	Patient's secondary payment source	A
23	Charges	Total charges for observation rounded up to the nearest dollar	A
24	Surgeon	Patient's surgeon for this visit: Unique Physician Number (UPN), or "DENSG", "PODTR" or "OTHER" or "MIDWIF"	B
25	Att_MD	Patient's attending physician: Unique physician Number (UPN), or "DENSG", "PODTR" or "OTHER" or "MIDWIF"	B
26	Oth_Care	Other caregiver	B
27	PDX	Patient's principal diagnosis: Valid ICD-9-CM code	A
28	Assoc_DX1	Patient's first associated diagnosis: Valid ICD-9-CM code	A

III. Data Standards

Data Element Field Descriptions and Error Categories

	Field Name:	Short Description:	Error Category:
29	Assoc_DX2	Patient's second associated diagnosis: Valid ICD-9-CM code	A
30	Assoc_DX3	Patient's third associated diagnosis: Valid ICD-9-CM code	A
31	Assoc_DX4	Patient's fourth associated diagnosis: Valid ICD-9-CM code	A
32	Assoc_DX5	Patient's fifth associated diagnosis: Valid ICD-9-CM code	A
33	P_PRO	Patient's Principal Procedure: Valid ICD-9-CM code	A
34	P_PRODATE	Date of patient's Principal Procedure	B
35	Assoc_PRO1	Patient's first associated procedure: Valid ICD-9-CM code	A
36	Assoc_DATE1	Date of patient's first associated procedure	B
37	Assoc_PRO2	Patient's second associated procedure: Valid ICD-9-CM code	A
38	Assoc_DATE2	Date of patient's second associated Procedure	B
39	Assoc_PRO3	Patient's third associated procedure: Valid ICD-9-CM code	A
40	Assoc_DATE3	Date of patient's third associated procedure	B
41	CPT1	Patient's first CPT code	A
42	CPT2	Patient's second CPT code	A
43	CPT3	Patient's third CPT code	A
44	CPT4	Patient's fourth CPT code	A
45	CPT5	Patient's fifth CPT code	A

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III. Data Standards

Data Element Field Descriptions and Error Categories

Additional Fields Created by the Division:

MonthofBeg_Date	Month of Begin Date	NA
YearofBeg_Date	Year of Begin Date	NA
MonthofEnd_Date	Month of End Date	NA
YearofEnd_Date	Year of End Date	NA
AgeOfPatient	Patient Age	NA
AgeUnits	Term Patient Age is Based On	NA
ObsSeq_Num	Observation Sequence Number	NA
NoofDaysBtwObs	Number of Days Between Observation Stays	NA
SubmissionPassed	Submission Passed Edits Flag	NA

Notes:

- 1) ICD-9-CM Code = International Classification of Diseases, 9th Revision, Clinical Modification
- 2) CPT = Physician's Current Procedural Terminology Codes

III. Data Standards

Outpatient Observation Data Codes

The following are the data codes for the required data elements that hospitals must report to the Division in accordance with Case Mix Regulation 114.1 CMR 17.00. We have also included data codes for the additional fields created by the Division. Each recipient for outpatient observation data has been granted approval by the Division to receive a certain level of data. Please refer to Section III for a description of Data Levels I – VI and to Section VIII to review the specific data elements contained in your data files. Please note that the higher levels contain an increasing number of Deniable Data Elements.

Field Name	Description
Hos_ID	Hospital Department of Public Health number
Multi_SiteN	Optional field for a hospital's determined number used to distinguish multiple sites that fall under one DPH number
Pt_ID	Unique Health Identification Number (UHIN)
MR_N	Patient's hospital medical record number
Acct_N	Hospital's billing number for the patient
MOSS	Mother's UHIN for infants up to one year old or less
MCD_ID	Medicaid Claim Certificate Number
DOB	Birth month, day, and year
Sex	1 = male; 2 = female; 3 = unknown
Race	1 = White; 2 = Black; 3=Asian; 4 = Hispanic; 5 = Native American; 6 = Other; 9 = Unknown
Zip_Code	Patient's residential 5-digit zip code
Ext_Zcode	Patient's residential 4 digit zip code extension
Beg_Date	Month, day, and year when service begins
End_Date	Month, day, and year when service ends
Obs_Time	Initial Observation encounter time. The time the patient became an Observation Stay patient.
Ser_Unit	The amount of time the patient has spent as an Observation Stay patient. The unit of service for Observation Stay is hours.

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III. Data Standards

Outpatient Observation Data Codes

Field Description	Description
Obs_Type	Observation Visit Status: 1 = Emergency, 2 = Urgent, 3 = Elective, 4 = Newborn, 5 = Information Not Available
Obs_1Srce	<p>Originating Observation Visit Source:</p> <p>1 = Direct Physician Referral, 2 = Within Hospital Clinic Referral 3 = Direct Health Plan Referral, 4 = Transfer from Acute Care Hospital, 5 = Transfer from SNF, 6 = Transfer from ICF, 7 = Outside Hospital ER Transfer, 8 = Court/Law Enforcement, 9 = Other, 0 = Information Not Available, L = Outside Hospital Clinic Referral, M = Walk-In/Self- Referral, R = Inside Hospital ER Transfer, T = Transfer from another Institution's SDS, W = Extramural Birth, Y = Within Hospital SDS Transfer</p> <p>Example: If a patient is transferred from a SNF to the hospital's clinic and then becomes an Observation Stay status, the Originating Observation Source would be "5 – Transfer from SNF".</p>
Obs_2Srce	<p>Secondary Observation Visit Source:</p> <p>1 = Direct Physician Referral, 2 = Within Hospital Clinic Referral 3 = Direct Health Plan Referral, 4 = Transfer from Acute Care Hospital, 5 = Transfer from SNF, 6 = Transfer from ICF, 7 = Outside Hospital ER Transfer, 8 = Court/Law Enforcement, 9 = Other, 0 = Information Not Available, L = Outside Hospital Clinic Referral, M = Walk-In/Self- Referral, R = Inside Hospital ER Transfer, T = Transfer from another Institution's SDS, W = Extramural Birth, Y = Within Hospital SDS Transfer</p> <p>Example: If a patient is transferred from a SNF to the hospital's clinic and then becomes an Observation Stay status, the Secondary Observation Source would be "2 – Within Hospital Clinic Transfer".</p>
Dep_Stat	<p>Patient Disposition (Departure Status):</p> <p>1 = Routine, 2 = Adm to Hospital, 3 = Transferred, 4 = AMA, 5 = Expired</p>
Payr_Pri	Primary Source of Payment. Please see Appendix H for Alphabetical Source of Payment List & Appendix I for Numerical Source of Payment List
Payr_Sec	Secondary Source of Payment. Please see Appendix H for Alphabetical Source of Payment List & Appendix I for Numerical Source of Payment List
Charges	Grand total of all charges associated with the patient's observation stay.

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III. Data Standards

Outpatient Observation Data Codes

Field Description	Description
Surgeon	Unique Physician Number (UPN), or “DENSG” = Dental Surgeon, “PODTR” = Podiatrist or “OTHER” = for situations where no permanent physician license number is assigned or if a limited license is assigned, or “MIDWF” = Midwife, Or ----- = Invalid
Att_MD	Unique Physician Number (UPN), or “DENSG” = Dental Surgeon, “PODTR” = Podiatrist or “OTHER” = for situations where no permanent physician license number is assigned or if a limited license is assigned, or “MIDWF” = Midwife, Or ----- = Invalid
Oth_Care	Other primary caregiver responsible for patient’s care: 1 = Resident, 2 = Intern, 3 = Nurse Practitioner, 4 = Not Used, 5 = Physician Assistant
PDX	ICD9 Principal Diagnosis excluding decimal point
Assoc_DX	ICD9 Associated Diagnosis, up to five associated diagnoses excluding the decimal point
P_PRO	Principal ICD9 Procedure excluding decimal point
P_PRODATE	Date of Patient’s Principal Procedure
Assoc_PRO	ICD9 Associated Procedures, up to three associated procedures excluding the decimal point
AssocDATE	Date(s) of patient’s associated procedures, up to three
CPT	CPT4, up to five CPT codes

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III. Data Standards

Outpatient Observation Data Codes

Additional Fields Created by the Division:

Field Description	Description
MonthofBeg_Date	1 = January, 2 = February, 3 = March, 4 = April, 5 = May, 6 = June, 7 = July, 8 = August, 9 = September, 10 = October, 11 = November, 12 = December
YearOfBeg_Date	4 digit year
MonthOfEnd_Date	1 = January, 2 = February, 3 = March, 4 = April, 5 = May, 6 = June, 7 = July, 8 = August, 9 = September, 10 = October, 11 = November, 12 = December
YearofEnd_Date	4 digit year
AgeOfPatient	In years if ≥ 1 , in weeks if < 1
AgeUnits	Weeks or Years
ObsSeqNum	Observation Sequence Number
NoofDaysBtwObs	Number of Days Between Observation Stays
SubmissionPassed	-1 = Passed, 0 = Failed

III. Data Standards

Description of Data Levels I - VI

Six Fiscal Year 2001 data levels have been created to correspond to the levels in ***Regulation 114.5 CMR 2.00; “Disclosure of Hospital Case Mix and Charge Data”***. Higher levels contain an increasing number of the data elements defined as “Deniable Data Elements” in Regulation 114.5 CMR 2.00. The deniable data elements include: the Unique Health Identification Number (UHIN - which is the encrypted patient social security number), the patient medical record number, hospital billing number, Mother’s UHIN, Medicaid claim certificate number (Medicaid Recipient ID number ID), date of birth, beginning and ending dates of service, the Unique Physician Number (UPN - which is the encrypted Massachusetts Board of Registration in Medicine License Number), and procedure dates.

The six levels include:

- | | |
|------------------|---|
| LEVEL I | Contains all case mix data elements, except the deniable data elements. |
| LEVEL II | Contains all Level I data elements, plus the UPN. |
| LEVEL III | Contains all Level I data elements, plus the patient UHIN, the mother’s UHIN, an observation sequence number for each UHIN observation record, and may include the number of days between each subsequent observation stay for each UHIN number. |
| LEVEL IV | Contains all Level I data elements, plus the patient UHIN, the mother’s UHIN, the UPN, an observation sequence number for each UHIN observation record, and may include the number of days between each subsequent observation stay for each UHIN number. |
| LEVEL V | Contains all Level IV data elements, plus the patient’s beginning service date, and ending service date and procedure dates. |
| LEVEL VI | Contains all of the deniable data elements, except the patient identifier component of the Medicaid recipient ID. |

IV. Data Verification Process

The year-end Outpatient Observation Data verification process is intended to present the hospitals with a profile of their individual data as retained by the Division. The purpose of this project is to function as a quality control measure for hospitals to review the data they have provided to the Division of Health Care Finance and Policy.

Hospitals have an opportunity to review their data each year. The Division produces a Profile Report for the hospital to review that contains a series of frequency distribution tables covering selected data elements. Examples of these tables include number of observation patients by month, average hours of service, charge summary, and the top diagnoses and procedures. A complete listing of all tables is shown below.

Profile Report Distribution Tables

• Observation Patient by Month	• Patient Sex Distribution
• Average Hours of Service	• Patient Race Distribution
• Charge Summary	• Top 10 Zip Codes of Patient Origin
• Observation Type Distribution	• Top 10 Primary Diagnoses, Average Charge, and Average Hours of Service
• Originating Referral / Transferring Source	• Top 10 Principal Procedures
• Secondary Referral / Transferring Source	• Top 10 Primary Payors
• Other Primary Caregivers	• Top 10 Secondary Payors
• Departure Status Summary	• Top 10 CPT Codes
• Patient Age Distribution	

IV. Data Verification Process

After reviewing each Profile Report, hospitals are asked to file a response form that provides the Division with verification that the report has been reviewed. The **Profile Report Response Form** provides each hospital with two alternatives for their reply:

Hospital Agrees (also known as an “A” response): By checking this category, a hospital indicates its agreement that the data appearing on the Profile Report is accurate and that it represents the hospital’s outpatient observation patient profile.

Hospital Discrepancies Noted (also known as a “B” response): By checking this category, a hospital indicates that the data on the report is accurate except for discrepancies noted.

If any discrepancies exist (i.e. a “B” response), the Division requests that hospitals provide a written explanation of the discrepancies, which will be included in this Outpatient Observation Documentation manual. A listing of the Profile Report Error Categories is shown below:

Profile Report Error Categories:

The discrepancy categories that hospitals may report on the Profile Report Verification Response form are as follows:

Patients by Month	Other Primary Caregivers	Diagnoses
Hours of Service	Departure Status	Procedures
Charge Summary	Age	Primary Payors
Observation Type Distribution	Sex	Secondary Payors
Originating Referring / Transfer Source	Race	CPT Codes
Secondary Referring / Transfer Source	Zip Codes	

Hospitals are strongly encouraged by the Division to review their Profile Report for inaccuracies and make necessary corrections so that subsequent quarters of data will be accurate.

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IV. Data Verification Process

Summary of Hospitals' FY 2001
Profile Report Responses

DPH ID	HOSPITAL NAME	'A'	'B'	NONE	COMMENTS
2006	Anna Jaques Hospital	X			
2226	Athol Memorial Hospital	X			
2339	Baystate Medical Center			X*	See footnote.
2313	Berkshire Health Systems – Berkshire Medical Center	X			
2069	Beth Israel Deaconess Med. Ctr.	X			
2307	Boston Medical Center	X			
2921	Brigham & Women's	X			
2118	Brockton Hospital	X			
2108	Cambridge Health Alliance – Cambridge & Somerville	X			
2046	Cambridge Health Alliance - Whidden	X			
2135	Cape Cod Health – Cape Cod Hospital	X			
2289	Cape Cod Health – Falmouth	X			
2101	Caritas Good Samaritan Med. Ctr.	X			

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IV. Data Verification Process

Summary of Hospitals' FY 2001
Profile Report Responses

DPH ID	HOSPITAL NAME	'A'	'B'	NONE	COMMENTS
2114	Caritas Norwood Hospital	X			
2003	Carney Hospital	X			
2139	Children's Hospital	X			
2155	Cooley-Dickinson Hospital	X			
2335	Dana Farber Cancer Institute	X			
2054	Deaconess-Glover Memorial Hospital			X*	See footnote.
2298	Deaconess-Nashoba Community Hospital		X		See explanation.
2067	Deaconess-Waltham Hospital	X			
2018	Emerson Hospital	X			
2052	Fairview Hospital	X			
2048	Faulkner Hospital	X			
2120	Franklin Medical Center			X*	See footnote.
2038	Hallmark Health – Lawrence Memorial	X			

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IV. Data Verification Process

Summary of Hospitals' FY 2001
Profile Report Responses

DPH ID	HOSPITAL NAME	'A'	'B'	NONE	COMMENTS
2058	Hallmark Health – Melrose Wakefield	X			
2143	Harrington Memorial Hospital		X		See explanation.
2036	Heywood Hospital	X			
2225	Holy Family Hospital	X			
2145	Holyoke Hospital	X			
2157	Hubbard Regional Hospital	X			
2082	Jordan Hospital	X			
2033	Lahey Clinic Hospital	X			
2099	Lawrence General Hospital	X			
2040	Lowell General Hospital	X			
2042	Martha's Vineyard Hospital	X			
2148	Mary Lane Hospital	X			

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IV. Data Verification Process

Summary of Hospitals' FY 2001 Profile Report Responses

DPH ID	HOSPITAL NAME	'A'	'B'	NONE	COMMENTS
2167	Massachusetts Eye & Ear Infirmary	X			
2168	Mass. General Hospital	X			
2149	Mercy Hospital	X			
2131	Merrimack Valley Hospital		X		See explanation.
2020	MetroWest Medical Center (Tenet) – Framingham		X		See explanation.
2039	MetroWest Medical Center (Tenet) – Natick		X		See explanation.
2105	Milford-Whitinsville Hospital	X			
2227	Milton Hospital	X			
2022	Morton Hospital & Medical Center	X			
2071	Mount Auburn Hospital	X			
2044	Nantucket Cottage Hospital	X			
2059	New England Baptist Hospital	X			

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IV. Data Verification Process

Summary of Hospitals' FY 2001
Profile Report Responses

DPH ID	HOSPITAL NAME	'A'	'B'	NONE	COMMENTS
2299	New England Medical Center	X			
2075	Newton-Wellesley Hospital	X			
2076	Noble Hospital	X			
2061	North Adams Regional Hospital	X			
2016	Northeast Health Systems – Addison Gilbert Hospital	X			
2007	Northeast Health Systems – Beverly Hospital	X			
2014	North Shore Medical Center – Salem	X			
2073	North Shore Medical Center - Union	X			
2150	Providence Hospital	X			
2151	Quincy Hospital	X			
2063	Saints Memorial Medical Center	X			
2337	Southcoast Health Systems – Charlton Memorial Hospital	X			
2010	Southcoast Health Systems – St. Luke's	X			

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IV. Data Verification Process

Summary of Hospitals' FY 2001 Profile Report Responses

DPH ID	HOSPITAL NAME	'A'	'B'	NONE	COMMENTS
2106	Southcoast Health Systems – Tobey		X		See explanation.
2107	South Shore Hospital	X			
2011	St. Anne's Hospital	X			
2085	St. Elizabeth's Hospital	X			
2128	Saint Vincent Hospital	X			
2100	Sturdy Memorial Hospital	X			
2126	UMass. Memorial – Clinton Hospital	X			
2034	UMass. Memorial – Health Alliance	X			
2103	UMass. Memorial – Marlborough	X			
2841	UMass. Memorial Medical Center	X			
2181	UMass. Memorial – Wing Memorial Hospital & Medical Center	X			
2094	Winchester Hospital	X			

*Hospital was strongly pursued to verify its data. Hospital was contacted numerous times via telephone and letter and given ample opportunity to respond. As of the cutoff date, however, the Division had not received a Verification Response form.

IV. Data Verification Process

Summary of Hospitals' FY 2001 Profile Report Responses

The following data discrepancies were reported by hospitals on their FY2001 Profile Report Verification Response forms:

Patients By Month
Hours of Service
Charge Summary
Observation Type Distribution
Originating / Refer. / Transfer. Source
Departure Status
Age
Sex
Race
Zip Codes
Diagnoses
Procedures
Primary Payors
Secondary Payors

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IV. Data Verification Process

FY01 Reported Profile Report Discrepancies by Category

Hospital	Patients by Month	Hours of Service	Charge Summary	Observation Type Distribution	Originating Referring / Transferring Source	Departure Status
Deaconess – Nashoba					X	
Harrington Memorial					X	
Merrimack Valley Hospital	X					
MetroWest – Framingham					X	
MetroWest – Natick					X	
Southcoast – Tobey	X	X	X	X	X	X

Hospital	Age	Sex	Race	Zip Codes	Diagnoses	Procedures
Southcoast – Tobey	X	X	X	X	X	X

Hospital	Primary Payers	Secondary Payers
Southcoast - Tobey	X	X

IV. Data Verification Process

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MetroWest – Natick	29
Southcoast – Tobey	30

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

DEACONESS NASHOBA HOSPITAL

Deaconess-Nashoba reported one discrepancy in the area Originating Referring / Transferring Source. Sixty-two (62) cases listed under “Outside Hospital ER Transfer” should have been coded “Within Hospital ER Transfer”. The change resulted in a total of 87 cases for Q1.

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

HARRINGTON MEMORIAL HOSPITAL

Harrington Memorial Hospital reported discrepancies in the area Originating Referring / Transferring Source. 1,413 patients listed under “Outside Hospital ER Transfer” should have been coded “Within Hospital ER Transfer”.

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

MERRIMACK VALLEY HOSPITAL

Merrimack Valley Hospital reported minor discrepancies in the area Patients by Month. The hospital submitted the following statement as an explanation.

As of 9/1/01 Essent Healthcare D.B.A. Merrimack Valley Hospital purchased Hale Hospital. All data prior to this period was submitted by Hale Hospital (City of Haverhill). Merrimack Valley Hospital reviewed the data contained in the DHCFP report and noted minor corrections to the Observation Patients by Month. Merrimack Valley had a total of 327 patients, compared to the 326 submitted by the City of Haverhill.

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

METROWEST MEDICAL CENTER - FRAMINGHAM

MetroWest Medical Center – Framingham reported discrepancies in the area Originating Referring / Transferring Source for Quarters 2, 3, and 4. The patients listed under M - “Walk-In/Self-Referral” should have been reported under R - “Inside Hospital ER Transfer”.

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

METROWEST MEDICAL CENTER – NATICK

MetroWest Medical Center – Natick reported discrepancies in the area Originating Referring / Transferring Source for Quarters 2, 3, and 4. The patients listed under M - “Walk-In/Self-Referral” should have been reported under R - “Inside Hospital ER Transfer”.

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

SOUTHCOAST – TOBEY HOSPITAL

Southcoast – Tobey Hospital reported discrepancies in all areas, resulting from a coding issue that existed at the time the tapes were created. As a result, the total observation case count is substantially understated. Therefore, all other data in the Tobey reports is understated.

V. Cautionary Use Data

The Outpatient Observation data files contain the most recent active data from each hospital. Active data includes submissions from hospitals that have “**passed**” the Division’s edits, and also includes submissions that have “**failed**”. Failing the edit process would mean that 1% or more of the observation stays did not pass the edit process. We consider data that did not pass the edit process to be “**cautionary use**” data.

We have included on each file a field called SubmissionPassed. This field serves as a flag and indicates whether the quarterly submission passed or failed the edit process.

- If a submission passed the edit process, the SubmissionPassed field for all observation stays within that submission are assigned a value of -1.
- If a submission failed the edit process, the SubmissionPassed field for all observation stays within that submission are assigned a value of 0.

Please see following page for specific information on hospitals with Cautionary Use data and missing data.

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FY2001 Outpatient Hospital Observation Database

V. Cautionary Use Data

Hospitals with Cautionary and Missing Data for FY2001

The Division is pleased to report that all hospitals had four quarters of passed data for the Observation Outpatient database for FY2001.

VI. Hospitals Submitting Observation Data FY2001

A. List of Hospitals Submitting Data for FY2001

Anna Jaques Hospital
Athol Memorial Hospital
Baystate Medical Center
Berkshire Health Systems – Berkshire Medical Center
Beth Israel Deaconess Medical Center
Boston Medical Center
Brigham & Women's Hospital
Brockton Hospital
Cambridge Health Alliance – Cambridge and Somerville
Cambridge Health Alliance – Whidden Memorial
Cape Cod Health Systems – Cape Cod Hospital
Cape Cod Health Systems – Falmouth Hospital
Caritas Good Samaritan Medical Center
Caritas Norwood Hospital
Carney Hospital
Children's Hospital
Cooley-Dickinson Hospital
Dana Farber Cancer Institute
Deaconess Glover Memorial Hospital
Deaconess Nashoba Community Hospital
Deaconess Waltham Hospital
Emerson Hospital
Fairview Hospital
Faulkner Hospital
Franklin Medical Center
Hallmark Health – Lawrence Memorial
Hallmark Health – Melrose Wakefield
Harrington Memorial Hospital
Heywood Hospital
Holy Family Hospital
Holyoke Hospital
Hubbard Regional Hospital
Jordan Hospital
Lahey Clinic Hospital
Lawrence General Hospital
Lowell General Hospital
Martha's Vineyard Hospital
Mary Lane Hospital
Massachusetts Eye & Ear Infirmary

VI. Hospitals Submitting Observation Data FY2001

A. List of Hospitals Submitting Data for FY2001 - *Continued*

Massachusetts General Hospital
Mercy Hospital
Merrimack Valley Hospital
MetroWest Medical Center (Tenet) – Framingham
MetroWest Medical Center (Tenet) - Natick
Milford-Whitinsville Regional Hospital
Milton Hospital
Morton Hospital
Mount Auburn Hospital
Nantucket Cottage Hospital
New England Baptist Hospital
New England Medical Center
Newton-Wellesley Hospital
Noble Hospital
North Adams Regional Hospital
Northeast Health Systems – Addison Gilbert
Northeast Health Systems – Beverly Hospital
North Shore Medical Center – Salem
North Shore Medical Center – Union
Quincy Medical Hospital
Saints Memorial Medical Center
Southcoast Health Systems – Charlton
Southcoast Health Systems – St. Luke's
Southcoast Health Systems – Tobey
South Shore Hospital
St. Anne's Hospital
St. Elizabeth's Medical Center
Saint Vincent Hospital
Sturdy Memorial Hospital
UMass. Memorial – Clinton
UMass. Memorial – Health Alliance Hospital
UMass. Memorial – Marlborough Hospital
UMass. Memorial – Medical Center
Winchester Hospital
Wing Memorial Hospital

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FY2001 Outpatient Hospital Observation Database

VI. Hospitals Submitting Observation Data FY2001

B. Hospitals with no Outpatient Observation Data Submissions FY2001

Hospital Name	Comments
Berkshire Health Systems – Hillcrest Campus	No data submissions for FY2001
Hallmark Health Care – Malden Campus	No observation stays as of Q4 FY2001
Providence Hospital	No data submissions for FY2001
Vencor – Boston	No data submissions for FY2001
Vencor – North Shore	No data submissions for FY2001

General Documentation
FY2001 Outpatient Hospital Observation Database

VI. Hospitals Submitting Observation Data FY2001

D. Hospitals that Do Not See Outpatient Observation Patients

Hospital Name	Comments
Berkshire Health – Hillcrest Campus	Does not see observation patients.
Hallmark Health Care – Malden	No observation patients as of Q4 FY00.
Providence	Does not see observation patients.
Vencor – Boston	Does not see observation patients.
Vencor – North Shore	Does not see observation patients.

VII. Calculated Fields

Age Calculation

Brief Description:

AgeOfPatient is calculated using the DateDiff Function in Access, which subtracts the date of birth (DOB) from the End_Date. Age is calculated to the nearest year (the remainder is dropped) if patient is at least 1 year old. The AgeUnits field is assigned a value of 'YEARS'. Age is calculated to the nearest week (the remainder is dropped) if a patient is less than 1 year old. The AgeUnits field is assigned a value of 'WEEKS'.

If the observation did not pass the edits for any reason the age is not calculated and the AgeOfPatient field is set to zero and the AgeUnits field is left blank.

Detailed Description:

1. If the observation passed the edits then the DateDiff function is used to determine the age in weeks of the patient by subtracting the Date of Birth from the End of Service Date.
2. If the age in weeks is greater than 51 then the DateDiff function is used to determine the age in years of the patient by subtracting the Date of Birth from the End of Service Date and the AgeUnits is set to "Years".
3. If the age in weeks is less than or equal to 51 then the DateDiff function is used to determine the age in weeks of the patient by subtracting the Date of Birth from the End of Service Date and the AgeUnits is set to "Weeks".
4. If the observation did not pass the edits then the AgeOfPatient is set to zero and the AgeUnits field is left blank.

VII. Calculated Fields

Observation Sequence Number Calculation

Brief Description:

The file is sorted by PT_ID (Unique Patient ID also known as the UHIN) and End Date. The Observation Sequence Number (ObsSeqNo) is then calculated by incrementing a counter for each of the PT_ID's observation stays.

If the observation did not pass the edits for any reason the Observation Sequence Number is not calculated and the ObsSeqNo field is set to zero.

Detailed Description:

1. The file is sorted by PT_ID (Unique Patient ID also known as the UHIN) and End_Date.
2. The sequence number is calculated by incrementing a counter from 1 to nnn, where a sequence number of 1 indicates the first observation stay for a PT_ID and nnn indicates the last observation stay for the PT_ID.
3. If the observation did not pass the edits then the ObsSeqNo is set to zero.

VII. Calculated Fields

Number of Days Between Observation Stays Calculation

Brief Description:

The file is sorted by PT_ID (Unique Patient ID also known as the UHIN) and End Date. For PT_IDs with 2 or more observation stays the Number of Days Between Observation Stays (NoofDaysBtwObs) is calculated using the DateDiff Function in Access which subtracts the previous observation end date from the current End_Date.

If the observation did not pass the edits for any reason the Number of Days Between Observation Stays is not calculated and the NoofDaysBtwObs field is set to zero.

Detailed Description:

1. The file is sorted by PT_ID (Unique Patient ID also known as the UHIN) and End_Date.
2. If this is the first occurrence of a PT_ID the Number of Days Between Observation Stays is set to zero.
3. If a second occurrence of a PT_ID is found then the Number of Days Between Observation Stays (NoofDaysBtwObs) is calculated by using the DateDiff Function in Access, which subtracts the previous observation end date from the current End_Date.
4. Step 3 is repeated for all subsequent observation stays until the PT_ID changes.
5. If the observation did not pass the edits then the NoofDaysBtwObs is set to zero.

VIII. Appendices

Appendix A.	.DBF File Structure
Appendix B.	.MDB File Structure
Appendix C.	.TXT File Structure
Appendix D.	Outpatient Observation Data Levels I – VI
Appendix E.	Hospital Addresses
Appendix F.	Hospital DPH ID, ORG ID & Facility Site ID
Appendix G.	Alphabetical Source of Payment List
Appendix H.	Numerical Source of Payment List
Appendix I.	Mergers, Name Changes, Closures, Conversions, and Non-Acute Care Hospitals

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Appendix A

Outpatient Observation .DBF File Structure

Field Name	Type	Width
HOS_ID	Character	4
MULTI_SITE	Character	1
PT_ID	Character	9
MR_N	Character	10
ACCT_N	Character	17
MOSS	Character	9
DOB	Character	10
SEX	Character	1
RACE	Character	1
ZIP_CODE	Character	5
BEG_DATE	Date	8
END_DATE	Date	8
OBS_TIME	Character	4
SER_UNIT	Character	6
OBS_TYPE	Character	1
OBS_1SRCE	Character	1
OBS_2SRCE	Character	1
DEP_STAT	Character	1
PAYR_PRI	Character	4
PAYR_SEC	Character	4
CHARGES	Numeric	11
SURGEON	Character	7
ATT_MD	Character	7
OTH_CARE	Character	1
PDX	Character	5
ASSOC_DX1	Character	5
ASSOC_DX2	Character	5
ASSOC_DX3	Character	5
ASSOC_DX4	Character	5
ASSOC_DX5	Character	5
P_PRO	Character	4
P_PRODATE	Date	8
ASSOC_PRO1	Character	4
ASSOCDATE1	Date	8
ASSOC_PRO2	Character	4
ASSOCDATE2	Date	8
ASSOC_PRO3	Character	4

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Appendix A

Outpatient Observation .DBF File Structure

Field Name	Type	Width
ASSOCDATE3	Date	8
CPT1	Character	5
CPT2	Character	5
CPT3	Character	5
CPT4	Character	5
CPT5	Character	5
MONTHOFBEG	Numeric	6
YEAROFBEG	Numeric	6
MONTHOFEND	Numeric	6
YEAROFEND	Numeric	6
AGEOFPATIE	Numeric	11
AGEUNITS	Character	254
OBSSEQNO	Numeric	11
NOOFDAYSBT	Numeric	11
<u>SUBMISSION</u>	<u>Logical</u>	<u>1</u>
Total		<u>537</u>

Please note: The data fields listed in bold are considered **Deniable Data Elements**. Depending on the level of data purchased, these fields may not be present on the file.

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Appendix B

Outpatient Observation .MDB File Structure

Field Name	Type	Width
Hos_ID	Text	4
Multi_SiteN	Text	1
Pt_ID	Text	9
MR_N	Text	10
Acct_N	Text	17
MOSS	Character	9
DOB	Text	10
Sex	Text	1
Race	Text	1
Zip_Code	Text	5
Beg_Date	Date/Time	8
End_Date	Date/Time	8
Obs_Time	Text	4
Ser_Unit	Text	6
Obs_Type	Text	1
Obs_1Srce	Text	1
Obs_2Srce	Text	1
Dep_Stat	Text	1
Payr_Pri	Text	4
Payr_Sec	Text	4
Charges	Number (long)	4
Surgeon	Text	7
Att_MD	Text	7
Oth_Care	Text	1
PDX	Text	5
Assoc_DX1	Text	5
Assoc_DX2	Text	5
Assoc_DX3	Text	5
Assoc_DX4	Text	5
Assoc_DX5	Text	5
P_PRO	Text	4
P_PRODATE	Date/Time	8
Assoc_Pro1	Text	4
AssocDate1	Date/Time	8
Assoc_Pro2	Text	4
AssocDate2	Date/Time	8
Assoc_Pro3	Text	4

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Appendix B

Outpatient Observation .MDB File Structure

Field Name	Type	Width
AssocDate3	Date/Time	8
CPT1	Text	5
CPT2	Text	5
CPT3	Text	5
CPT4	Text	5
CPT5	Text	5
MonthofBeg_Date	Number (Integer)	2
YearofBeg_Date	Number (Integer)	2
MonthofEnd_Date	Number (Integer)	2
YearofEnd_Date	Number (Integer)	2
AgeOfPatient	Number (Integer)	4
AgeUnits	Text	255
ObsSeqNo	Number (Long)	4
NoofDaysBtwObsSBT	Number (Long)	4
SubmissionPassed	Yes/No	1

Please note: The data fields listed in bold are considered **Deniable Data Elements**. Depending on the level of data purchased, these fields may not be present on the file.

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Appendix C

Outpatient Observation .TXT File Structure

Field Name
Hos_ID
Multi_SiteN
Pt_ID
MR_N
Acct_N
MOSS
DOB
Sex
Race
Zip_Code
Beg_Date
End_Date
Obs_Time
Ser_Unit
Obs_Type
Obs_1Srce
Obs_2Srce
Dep_Stat
Payr_Pri
Payr_Sec
Charges
Surgeon
Att_MD
Oth_Care
PDX
Assoc_DX1
Assoc_DX2
Assoc_DX3
Assoc_DX4
Assoc_DX5
P_PRO
P_PRODATE
Assoc_Pro1
AssocDate1
Assoc_Pro2
AssocDate2
Assoc_Pro3

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FY2001 Outpatient Hospital Observation Database

Appendix C

Outpatient Observation .TXT File Structure

Field Name
AssocDate3
CPT1
CPT2
CPT3
CPT4
CPT5
MonthofBeg_Date
YearofBeg_Date
MonthofEnd_Date
YearofEnd_Date
AgeOfPatient
AgeUnits
ObsSeqNo
NoofDaysBtwObsSBT
SubmissionPassed

Please note: The data fields listed in bold are considered **Deniable Data Elements**. Depending on the level of data purchased, these fields may not be present on the file.

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Appendix D
Outpatient Observation Data Levels I – VI

Field Name	Field Description	Deniable Data Elements	Level I	Level II	Level III	Level IV	Level V	Level IV
Hos_ID	Hospital DPH Number		X	X	X	X	X	X
Multi_SiteN	Hosp's Designated Multiple Site #		X	X	X	X	X	X
Pt_ID	Unique Health Identification Number (UHIN)	D			D	D	D	D
MR_N	Patient's Medical Record Number	D						D
Acct_N	Hospital Billing Number	D						D
MOSS	Mother's UHIN	D			D	D	D	D
DOB	Date of Birth	D						D
Sex	Sex		X	X	X	X	X	X
Race	Race		X	X	X	X	X	X
Zip_Code	Zip Code		X	X	X	X	X	X
Beg_Date	Patient's Beginning Service Date	D					D	D
End_Date	Patient's Ending Service Date	D					D	D
Obs_Time	Initial Encounter Time of Day		X	X	X	X	X	X

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Appendix D
Outpatient Observation Data Levels I – VI

Field Name	Field Description	Deniable Data Elements	Level I	Level II	Level III	Level IV	Level V	Level IV
Ser_Unit	Unit of Service in Hours (= Length of Stay)		X	X	X	X	X	X
Obs_Type	Type of Visit Status		X	X	X	X	X	X
Obs_1Srce	Originating Referring or Transferring Source		X	X	X	X	X	X
Obs_2Srce	Secondary Referring or Transferring Source		X	X	X	X	X	X
Dep_Stat	Departure Status		X	X	X	X	X	X
Payr_Pri	Primary Source of Payment		X	X	X	X	X	X
Payr_Sec	Secondary Source of Payment		X	X	X	X	X	X
Charges	Charges		X	X	X	X	X	X
Surgeon	Surgeon for this Visit (will be UPN)	D		D		D	D	D
Att_MD	Attending Physician (will be UPN)	D		D		D	D	D
Oth_Care	Other Caregiver		X	X	X	X	X	X
PDX	Principle Diagnosis		X	X	X	X	X	X
Assoc_DX1	Patient's First Associated Diagnosis		X	X	X	X	X	X
Assoc_DX2	Patient's Second Associated Diagnosis		X	X	X	X	X	X
Assoc_DX3	Patient's Third Associated Diagnosis		X	X	X	X	X	X

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Appendix D
Outpatient Observation Data Levels I – VI

Field Name	Field Description	Deniable Data Elements	Level I	Level II	Level III	Level IV	Level V	Level IV
Assoc_DX4	Patient's Fourth Associated Diagnosis		X	X	X	X	X	X
Assoc_DX5	Patient's Fifth Associated Diagnosis		X	X	X	X	X	X
P_PRO	Principle Procedure		X	X	X	X	X	X
P_PRODATE	Date of Principle Procedure	D					D	D
Assoc_Pro1	First Associated Procedure		X	X	X	X	X	X
AssocDate1	Date of First Associated Procedure	D					D	D
Assoc_Pro2	Second Associated Procedure		X	X	X	X	X	X
AssocDate2	Date of Second Associated Procedure	D					D	D
Assoc_Pro3	Third Associated Procedure		X	X	X	X	X	X
AssocDate3	Date of Third Associated Procedure	D					D	D
CPT1	First CPT Code		X	X	X	X	X	X
CPT2	Second CPT Code		X	X	X	X	X	X
CPT3	Third CPT Code		X	X	X	X	X	X
CPT4	Fourth CPT Code		X	X	X	X	X	X
CPT5	Fifth CPT Code		X	X	X	X	X	X

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Appendix D
Outpatient Observation Data Levels I – VI

Field Name	Field Description	Deniable Data Elements	Level I	Level II	Level III	Level IV	Level V	Level IV
MonthofBeg_Date	Month of Begin Date		X	X	X	X	X	X
YearofBeg_Date	Year of Begin Date		X	X	X	X	X	X
MonthofEnd_Date	Month of End Date		X	X	X	X	X	X
YearofEnd_Date	Year of End Date		X	X	X	X	X	X
AgeOfPatient	Patient Age		X	X	X	X	X	X
AgeUnits	Term Patient Age is Based On		X	X	X	X	X	X
ObsSeqNo	Observation Sequence number ordering each consecutive UHIN observation record				X	X	X	X
NoofDaysBtwObs	Number of days between each subsequent observation stay for that UHIN number				X	X	X	X
SubmissionPassed	Submission Passed Edits Flag		X	X	X	X	X	X

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Appendix E

Hospital Addresses

Anna Jaques Hospital 25 Highland Avenue Newburyport, MA 01950	Athol Memorial Hospital 2033 Main Street Athol, MA 01331
Baystate Medical Center 3601 Main Street Springfield, MA 01107-1116	Berkshire Health Systems Berkshire Medical Center Campus 725 North Street Pittsfield, MA 01201
Berkshire Health Systems – Hillcrest Hospital Campus 165 Tor Court Road Pittsfield, MA 01201	Beth Israel Deaconess Medical Center 330 Brookline Avenue Boston, MA 02215
Boston Medical Center 88 East Newton Street Boston, MA 02118	Brigham & Women's Hospital 75 Francis Street Boston, MA 02115
Brockton Hospital 680 Centre Street Brockton, MA 02402	Cambridge Health Alliance Cambridge & Somerville 65 Beacon Street Somerville, MA 02143
Cambridge Health Alliance – Malden 100 Hospital Road Malden, MA 02148	Cambridge Health Alliance – Whidden 103 Garland Street Everett, MA 02149
Cape Cod Health Systems Cape Cod Hospital 27 Park Street Hyannis, MA 02601	Cape Cod Health Systems Falmouth Hospital 100 Ter Heun Drive Falmouth, MA 02540
Caritas Good Samaritan Medical Center 235 North Pearl Street Brockton, MA 02301	Caritas Norwood Hospital 800 Washington Street Norwood, MA 02062
Carney Hospital 2100 Dorchester Avenue Dorchester, MA 02124	Children's Hospital 300 Longwood Avenue Boston, MA 02115
Cooley Dickinson Hospital 30 Locust Street Northampton, MA 01060-5001	Dana Farber Cancer Institute 44 Binney Street Boston, MA 02115
Deaconess Glover Memorial Hospital 148 Chestnut Street Needham, MA 02192	Deaconess Nashoba Hospital 200 Groton Road Ayer, MA 01432

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Appendix E

Hospital Addresses

Deaconess Waltham Hospital Hope Avenue Waltham, MA 02254	Emerson Hospital Route 2 Concord, NH 01742
Fairview Hospital 29 Lewis Avenue Great Barrington, MA 01230	Faulkner Hospital 1153 Centre Street Jamaica Plain, MA 02130
Franklin Medical Center 164 High Street Greenfield, MA 01301	Hallmark Health Care – Lawrence Memorial Campus 170 Governors Avenue Medford, MA 02155
Hallmark Health Care – Melrose- Wakefield Hospital Campus 585 Lebanon Street Melrose, MA 02176	Harrington Memorial Hospital 100 South Street Southbridge, MA 01550
Heywood Hospital 242 Green Street Gardner, MA 01440	Holy Family Hospital 70 East Street Methuen, MA 01844
Holyoke Hospital 575 Beech Street Holyoke, MA 01040	Hubbard Regional Hospital 340 Thompson Road Webster, MA 01570
Jordan Hospital 275 Sandwich Street Plymouth, MA 02360	Lahey Clinic Hospital 41 Mall Road Burlington, MA 01805
Lawrence General Hospital One General Street Lawrence, MA 01842-0389	Lowell General Hospital 295 Varnum Avenue Lowell, MA 01854
Martha's Vineyard Hospital Linton Lane Oak Bluffs, MA 02557	Mary Lane Hospital 85 South Street Ware, MA 01082
Massachusetts Eye & Ear Infirmary 243 Charles Street Boston, MA 02114-3096	Massachusetts General Hospital 55 Fruit Street Boston, MA 02114
Mercy Hospital 271 Carew Street Springfield, MA 01102	Merrimack Valley Hospital 140 Lincoln Avenue Haverhill, MA 01830-6798

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Appendix E

Hospital Addresses

MetroWest Medical Center (Tenet) – Framingham 115 Lincoln Street Framingham, MA 01701	MetroWest Medical Center (Tenet) – Natick 67 Union Street Natick, MA 01760
Milford-Whitinsville Regional Hospital 14 Prospect Street Milford, MA 01757	Milton Hospital 92 Highland Street Milton, MA 02186
Morton Hospital & Medical Center 88 Washington Street Taunton, MA 02780	Mount Auburn Hospital 330 Mt. Auburn Street Cambridge, MA 02238
Nantucket Cottage Hospital 57 Prospect Street Nantucket, MA 02554	New England Baptist Hospital 125 Parker Hill Avenue Boston, MA 02120
New England Medical Center 750 Washington Street Boston, MA 02111	Newton-Wellesley Hospital 2014 Washington Street Newton, MA 02162
Noble Hospital 115 West Silver Street Westfield, MA 01086	North Adams Regional Hospital Hospital Avenue North Adams, MA 01247
Northeast Health Systems – Addison Gilbert Campus 298 Washington Street Gloucester, MA 01930	Northeast Health Systems – Beverly Campus 85 Herrick Street Beverly, MA 01915
North Shore Medical Center – Salem 81 Highland Avenue Salem, MA 01970	North Shore Medical Center – Union 500 Lynnfield Street Lynn, MA 01904-1424
Quincy Hospital 114 Whitwell Street Quincy, MA 02169	Saints Memorial Medical Center One Hospital Drive Lowell, MA 01852
Southcoast Health Systems – Charlton Memorial Hospital 363 Highland Avenue Fall River, MA 02720	Southcoast Health Systems – St. Luke's Hospital 101 Page Street New Bedford, MA 02740
Southcoast Health Systems – Tobey Hospital 43 High Street Wareham, MA 02571	South Shore Hospital 55 Fogg Road South Weymouth, MA 02190

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Appendix E

Hospital Addresses

St. Anne's Hospital 795 Middle Street Fall River, MA 02721	St. Elizabeth's Hospital 736 Cambridge Street Brighton, MA 02135
Saint Vincent Hospital 25 Winthrop Street Worcester, MA 01604	Sturdy Memorial Hospital 211 Park Street Attleboro, MA 02703
UMass. Memorial – Clinton Hospital 201 Highland Street Clinton, MA 01510	UMass. Memorial – Health Alliance 60 Hospital Road Leominster, MA 01453-8004
UMass. / Marlborough Hospital 57 Union Street Marlborough, MA 01752-9981	UMass. / Memorial Health Care 11 Shattuck Street Worcester, MA 01605
Winchester Hospital 41 Highland Avenue Winchester, MA 01890	Wing Memorial Hospital 40 Wright Street Palmer, MA 01069-1187

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Appendix F

DPH ID, ORG ID & FACILITY SITE ID NUMBERS

Current Organization Name	Organization ID	DPH ID	Facility Site ID
Anna Jaques Hospital	1	2006	
Athol Hospital	2	2226	
Baystate Medical Center	4	2339	
Berkshire Health Systems – Berkshire Medical Campus	7	2313	7
Berkshire Health Systems – Hillcrest Hospital Campus	9	2231	9
Beth Israel Deaconess	10	2069	
Beth Israel Deaconess – Needham	53	2054	
Boston Medical Center – Harrison Avenue Campus	16	2307	16
Boston Medical Center – East Newton Street Campus	144	2307	144
Brigham & Women's	22	2921	
Brockton Hospital	25	2118	
Cable Emergency Center	3118		
Cambridge Health Alliance – Cambridge Campus	27	2108	27
Cambridge Health Alliance – Somerville Campus	143	2108	143
Cambridge Health Alliance – Whidden Memorial Campus	142	2108	142
Cape Cod Health System – Cape Cod Hospital	39	2135	
Cape Cod health System – Falmouth Hospital	40	2289	
Caritas Carney Hospital	42	2003	
Caritas Good Samaritan Medical Center	62	2101	
Caritas Holy Family Hospital	75	2225	
Caritas Norwood Hospital	41	2114	
Caritas St. Anne's Hospital	114	2011	
Caritas St. Elizabeth's Hospital	126	2085	

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Appendix F

DPH ID, ORG ID & FACILITY SITE ID NUMBERS

Current Organization Name	Organization ID	DPH ID	Facility Site ID
Children's Hospital	46	2139	
Clinton Hospital	132	2126	
Cooley-Dickinson Hospital	50	2155	
Dana Farber Cancer Center	51	2335	
Emerson Hospital	57	2018	
Fairview Hospital	8	2052	
Faulkner Hospital	59	2048	
Franklin Medical Center	5	2120	
Hallmark Health Systems – Lawrence Memorial Campus	66	2038	
Hallmark Health Systems – Melrose Wakefield Campus	141	2058	
Harrington Memorial Hospital	68	2143	
Health Alliance Hospital	71	2034	
Heywood Hospital	73	2036	
Holyoke Hospital	77	2145	
Hubbard Regional Hospital	78	2157	
Jordan Hospital	79	2082	
Lahey Clinic – Burlington Campus	81	2033	81
Lahey Clinic – North Shore Campus	4448	2033	4448
Lawrence General Hospital	83	2099	
Lowell General Hospital	85	2040	
Marlborough Hospital	133	2103	
Martha's Vineyard Hospital	88	2042	
Mary Lane Hospital	6	2148	
Massachusetts Eye & Ear	89	2167	
Massachusetts General Hospital	91	2168	
Mercy Hospital – Springfield		2150	
Merrimack Valley Hospital	70	2131	
MetroWest – Framingham	49	2020	
MetroWest – Leonard Morse	457	2039	
Milford-Whitinsville Hospital	97	2105	
Milton Hospital	98	2227	

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Appendix F

DPH ID, ORG ID & FACILITY SITE ID NUMBERS

Current Organization Name	Organization ID	DPH ID	Facility Site ID
Morton Hospital	99	2022	
Mount Auburn Hospital	100	2071	
Nantucket Cottage	101	2044	
Nashoba Valley Community	52	2298	
New England Baptist Hospital	103	2059	
Newton Wellesley Hospital	105	2075	
Noble Hospital	106	2076	
North Adams Regional Hospital	107	2061	
Northeast – Addison Gilbert	109	2016	
Northeast – Beverly	110	2007	
Quincy Medical Center	112	2151	
Saints Memorial Medical Center	115	2063	
Salem Hospital	116	2014	
Southcoast Health Systems – Charlton Memorial	123	2337	
Southcoast Health Systems – St. Luke's	124	2010	
Southcoast Health Systems – Tobey Hospital	145	2106	
South Shore Hospital	122	2107	
Saint Vincent Hospital	127	2128	
Sturdy Memorial Hospital	129	2100	
Tufts New England Medical Center	104	2299	
UMass. Health – Memorial Hospital Campus	130	2841	130
UMass. Health – UMass. Medical Center Campus	131	2841	131
Union Hospital	3	2073	
Waltham Hospital	54	2067	
Winchester Hospital	138	2094	
Wing Memorial Hospital	139	2181	

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
137	AARP/Medigap supplement **	7	COM
71	ADMAR	E	PPO
51	Aetna Life Insurance	7	COM
161	Aetna Managed Choice POS	D	COM-MC
22	Aetna Open Choice PPO	D	COM-MC
272	Auto Insurance	T	AI
138	Banker's Life and Casualty Insurance **	7	COM
139	Banker's Multiple Line **	7	COM
2	Bay State – a product of HMO Blue	C	BCBS-MC
136	BCBS Medex **	6	BCBS
11	Blue Care Elect	C	BCBS-MC
46	Blue CHiP (BCBS Rhode Island)	8	HMO
160	Blue Choice (incl. Healthflex Blue) - POS	C	BCBS-MC
142	Blue Cross Indemnity	6	BCBS
50	Blue Health Plan for Kids	6	BCBS
52	Boston Mutual Insurance	7	COM
154	BCBS Other (not listed elsewhere) ***	6	BCBS
155	Blue Cross Managed Care Other (not listed elsewhere) ***	C	BCBS-MC
151	CHAMPUS	5	GOV
204	Christian Brothers Employee	7	COM
30	CIGNA (Indemnity)	7	COM
250	CIGNA HMO	D	COM-MC
171	CIGNA POS	D	COM-MC
87	CIGNA PPO	D	COM-MC
140	Combined Insurance Company of America**	7	COM
21	Commonwealth PPO	C	BCBS-MC
44	Community Health Plan	8	HMO
13	Community Health Plan Options (New York)	J	POS
42	ConnectiCare of Massachusetts	8	HMO
54	Continental Assurance Insurance	7	COM
69	Corporate Health Insurance Liberty Plan	7	COM
4	Fallon Community Health Plan (includes Fallon Plus, Fallon Affiliates, Fallon UMass.)	8	HMO

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
167	Fallon POS	J	POS
67	First Allmerica Financial Life Insurance	7	COM
181	First Allmerica Financial Life Insurance EPO	D	COM-MC
27	First Allmerica Financial Life Insurance PPO	D	COM-MC
152	Foundation	0	OTH
143	Free Care	9	FC
990	Free Care – co-pay, deductible, or co-insurance (when billing for free care services use #143)	9	FC
88	Freedom Care	E	PPO
153	Grant	0	OTH
162	Great West Life POS	D	COM-MC
28	Great West Life PPO	D	COM-MC
89	Great West/NE Care	7	COM
55	Guardian Life Insurance	7	COM
23	Guardian Life Insurance Company PPO	D	COM-MC
56	Hartford L&A Insurance	7	COM
200	Hartford Life Insurance Co **	7	COM
1	Harvard Community Health Plan	8	HMO
20	HCHP of New England (formerly RIGHA)	8	HMO
37	HCHP-Pilgrim HMO (integrated product)	8	HMO
208	HealthNet (Boston Medical Center MCD Program)	B	MCD-MC
14	Health New England Advantage POS	J	POS
38	Health New England Select (self-funded)	8	HMO
24	Health New England, Inc.	8	HMO
45	Health Source New Hampshire	8	HMO
98	Healthy Start	9	FC
251	Healthsource CMHC HMO	8	HMO
164	Healthsource CMHC Plus POS	J	POS
49	Healthsource CMHC Plus PPO	E	PPO
72	Healthsource New Hampshire	7	COM
165	Healthsource New Hampshire POS (Self-funded)	J	POS
90	Healthsource Preferred (self-funded)	E	PPO
271	Hillcrest HMO	8	HMO
81	HMO Blue	C	BCBS-MC
130	Invalid (replaced by #232 and 233)		
12	Invalid (replaced by #49)		

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
53	Invalid (no replacement)		
117	Invalid (no replacement)		
123	Invalid (no replacement)		
92	Invalid (replaced by # 84, 166, 184)		
105	Invalid (replaced by #111)		
32	Invalid (replaced by #157 and 158)		
41	Invalid (replaced by #157)		
15	Invalid (replaced by #158)		
29	Invalid (replaced by #171 and 250)		
16	Invalid (replaced by #172)		
124	Invalid (replaced by #222)		
126	Invalid (replaced by #230)		
122	Invalid (replaced by #234)		
6	Invalid (replaced by #251)		
76	Invalid (replaced by #270)		
26	Invalid (replaced by #75)		
5	Invalid (replaced by #9)		
61	Invalid (replaced by #96)		
68	Invalid (replaced by #96)		
60	Invalid (replaced by #97)		
57	John Hancock Life Insurance	7	COM
82	John Hancock Preferred	D	COM-MC
169	Kaiser Added Choice	J	POS
40	Kaiser Foundation	8	HMO
58	Liberty Life Insurance	7	COM
85	Liberty Mutual	7	COM
59	Lincoln National Insurance	7	COM
19	Matthew Thornton	8	HMO
103	Medicaid (includes MassHealth)	4	MCD
107	Medicaid Managed Care – Community Health Plan	B	MCD-MC
108	Medicaid Managed Care – Fallon Community Health Plan	B	MCD-MC
109	Medicaid Managed Care – Harvard Community Health Plan	B	MCD-MC
110	Medicaid Managed Care – Health New England	B	MCD-MC
111	Medicaid Managed Care – HMO Blue	B	MCD-MC

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
112	Medicaid Managed Care – Kaiser Foundation Plan	B	MCD-MC
113	Medicaid Managed Care – Neighborhood Health Plan	B	MCD-MC
115	Medicaid Managed Care – Pilgrim Health Care	B	MCD-MC
114	Medicaid Managed Care – United Health Plans of NE (Ocean State Physician's Plan)	B	MCD-MC
119	Medicaid Managed Care Other (not listed elsewhere) ***	B	MCD-MC
106	Medicaid Managed Care-Central Mass. Health Care	B	MCD-MC
104	Medicaid Managed Care-Primary Care Clinician (PCC)	B	MCD-MC
116	Medicaid Managed Care – Tufts Associated Health Plan	B	MCD-MC
118	Medicaid Mental Health & Substance Abuse Plan – Mass Behavioral Health Partnership	B	MCD-MC
121	Medicare	3	MCR
220	Medicare HMO – Blue Care 65	F	MCR-MC
125	Medicare HMO – Fallon Senior Plan	F	MCR-MC
221	Medicare HMO – Harvard Community Health Plan 65	F	MCR-MC
223	Medicare HMO – Harvard Pilgrim Health Care of New England Care Plus	F	MCR-MC
230	Medicare HMO – HCHP First Seniority	F	MCR-MC
127	Medicare HMO – Health New England Medicare Wrap **	F	MCR-MC
222	Medicare HMO – Healthsource CMHC	F	MCR-MC
212	Medicare HMO – Healthsource CMHC Central Care Supplement **	F	MCR-MC
128	Medicare HMO – HMO Blue for Seniors **	F	MCR-MC
129	Medicare HMO – Kaiser Medicare Plus Plan **	F	MCR-MC
234	Medicare HMO – Managed Blue for Seniors	F	MCR-MC
132	Medicare HMO – Matthew Thornton Senior Plan	F	MCR-MC
211	Medicare HMO – Neighborhood Health Plan Senior Health Plus **	F	MCR-MC
134	Medicare HMO – Other (not listed elsewhere) ***	F	MCR-MC
131	Medicare HMO – Pilgrim Enhance 65 **	F	MCR-MC
210	Medicare HMO – Pilgrim Preferred 65 **	F	MCR-MC

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
231	Medicare HMO – Pilgrim Prime	F	MCR-MC
232	Medicare HMO – Seniorcare Direct	F	MCR-MC
233	Medicare HMO – Seniorcare Plus	F	MCR-MC
224	Medicare HMO – Tufts Secure Horizons	F	MCR-MC
225	Medicare HMO – US Healthcare	F	MCR-MC
133	Medicare HMO – Tufts Medicare Supplement (TMS)	F	MCR-MC
43	MEDTAC	8	HMO
96	Metrahealth (United Care of NE)	7	COM
158	Metrahealth – HMO (United Care of NE)	D	COM-MC
172	Metrahealth – POS (United Care of NE)	D	COM-MC
157	Metrahealth – PPO (United Care of NE)	D	COM-MC
201	Mutual of Omaha **	7	COM
62	Mutual of Omaha Insurance	7	COM
33	Mutual of Omaha PPO	D	COM-MC
47	Neighborhood Health Plan	8	HMO
3	Network Blue (PPO)	C	BCBS-MC
207	Network Health (Cambridge Health Alliance MCD Program)	B	MCD-MC
91	New England Benefits	7	COM
63	Mutual of Omaha Insurance	7	COM
64	New York Life Care Indemnity (New York Life Insurance)	7	COM
34	New York Life Care PPO	D	COM-MC
202	New York Life Insurance **	7	COM
159	None (Valid only for secondary source of payment)	N	NONE
31	One Health Plan HMO (Great West Life)	D	COM-MC
77	Options for Healthcare PPO	E	PPO
147	Other Commercial Insurance (not listed elsewhere) ***	7	COM
199	Other EPO (not listed elsewhere) ***	K	EPO
144	Other Government	5	GOV
148	Other HMO (not listed elsewhere) ***	8	HMO
141	Other Medigap (not listed elsewhere)	7	COM
150	Other Non-Managed Care (not listed elsewhere) ***	0	OTH
99	Other POS (not listed elsewhere) ***	J	POS
156	Out of State BCBS	6	BCBS
120	Out-of-State Medicaid	5	GOV
135	Out-of-State Medicare	3	MCR

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
65	Paul Revere Life Insurance	7	COM
78	Phoenix Preferred PPO	D	COM-MC
10	Pilgrim Advantage - PPO	E	PPO
39	Pilgrim Direct	8	HMO
8	Pilgrim Health Care	8	HMO
95	Pilgrim Select - PPO	E	PPO
183	Pioneer Health Care EPO	K	EPO
79	Pioneer Health Care PPO	E	PPO
25	Pioneer Plan	8	HMO
149	PPO and Other Managed Care (not listed elsewhere) ***	E	PPO
203	Principal Financial Group (Principal Mutual Life)	7	COM
184	Private Healthcare Systems EPO	K	EPO
166	Private Healthcare Systems POS	J	POS
84	Private Healthcare Systems PPO	E	PPO
75	Prudential Healthcare HMO	D	COM-MC
17	Prudential Healthcare POS	D	COM-MC
18	Prudential Healthcare PPO	D	COM-MC
66	Prudential Insurance	7	COM
93	Psychological Health Plan	E	PPO
101	Quarto Claims	7	COM
168	Reserved		
173-180	Reserved		
185-198	Reserved		
205-209	Reserved		
213-219	Reserved		
226-229	Reserved		
235-249	Reserved		
252-269	Reserved		
145	Self-Pay	1	SP
94	Time Insurance Co	7	COM
100	Transport Life Insurance	7	COM
7	Tufts Associated Health Plan	8	HMO
80	Tufts Total Health Plan PPO	E	PPO
97	Unicare	7	COM
182	Unicare Preferred Plus Managed Access EPO	D	COM-MC
270	Unicare Preferred Plus PPO	D	COM-MC
70	Union Labor Life Insurance	7	COM

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
86	United Health & Life PPO (Subsidiary of United Health Plans of NE)	E	PPO
73	United Health and Life (subsidiary of United Health Plans of NE)	7	COM
9	United Health Plan of New England (Ocean State)	8	HMO
74	United Healthcare Insurance Company	7	COM
35	United Healthcare Insurance Company – HMO (new for 1997)	D	COM-MC
163	United Healthcare Insurance Company – POS (new for 1997)	D	COM-MC
36	United Healthcare Insurance Company – PPO (new for 1997)	D	COM-MC
48	US Healthcare	8	HMO
83	US Healthcare Quality Network Choice-PPO	E	PPO
170	US Healthcare Quality POS	J	POS
102	Wausau Insurance Company	7	COM
146	Worker's Compensation	2	WOR

** Supplemental Payer Source

***Please list under the specific carrier when possible

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**SUPPLEMENTAL PAYER SOURCES
USE AS SECONDARY PAYER SOURCE ONLY**

SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
137	AARP/Medigap Supplement	7	COM
138	Banker's Life and Casualty Insurance	7	COM
139	Bankers Multiple Line	7	COM
136	BCBS Medex	6	BCBS
140	Combined Insurance Company of America	7	COM
200	Hartford Life Insurance Company	7	COM
127	Medicare HMO – Health New England Medicare Wrap	F	MCR-MC
212	Medicare HMO – Healthsource CMHC Central Care Supplement	F	MCR-MC
128	Medicare HMO – HMO Blue for Seniors	F	MCR-MC
129	Medicare HMO-Kaiser Medicare Plus Plan	F	MCR-MC
131	Medicare HMO – Pilgrim Enhance 65	F	MCR-MC
210	Medicare HMO-Pilgrim Preferred 65	F	MCR-MC
201	Mutual of Omaha	7	COM
211	Neighborhood Health Plan Senior Health Plus	F	MCR-MC
202	New York Life Insurance Company	7	COM
141	Other Medigap (not listed elsewhere) ***	7	COM
133	Medicare HMO – Tufts Medicare Supplement (TMS)	F	MCR-MC

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
1	Harvard Community Health Plan	8	HMO
2	Bay State – a product of HMO Blue	C	BCBS-MC
3	Network Blue (PPO)	C	BCBS-MC
4	Fallon Community Health Plan (includes Fallon Plus, Fallon Affiliates, Fallon UMass)	8	HMO
5	Invalid (replaced by #9)		
6	Invalid (replaced by #251)		
7	Tufts Associated Health Plan	8	HMO
8	Pilgrim Health Care	8	HMO
9	United Health Plan of New England (Ocean State)	8	HMO
10	Pilgrim Advantage - PPO	E	PPO
11	Blue Care Elect	C	BCBS-MC
12	Invalid (replaced by #49)		
13	Community Health Plan Options (New York)	J	POS
14	Health New England Advantage POS	J	POS
15	Invalid (replaced by #158)		
16	Invalid (replaced by #172)		
17	Prudential Healthcare POS	D	COM-MC
18	Prudential Healthcare PPO	D	COM-MC
19	Matthew Thornton	8	HMO
20	HCHP of New England (formerly RIGHA)	8	HMO
21	Commonwealth PPO	C	BCBS-MC
22	Aetna Open Choice PPO	D	COM-MC
23	Guardian Life Insurance Company PPO	D	COM-MC
24	Health New England Inc.	8	HMO
25	Pioneer Plan	8	HMO
26	Invalid (replaced by #75)		
27	First Allmerica Financial Life Insurance PPO	D	COM-MC
28	Great West Life PPO	D	COM-MC
29	Invalid (replaced by #171 & 250)		
30	CIGNA (Indemnity)	7	COM
31	One Health Plan HMO (Great West Life)	D	COM-MC
32	Invalid (replaced by #157 & 158)		

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
33	Mutual of Omaha PPO	D	COM-MC
34	New York Life Care PPO	D	COM-MC
35	United Healthcare Insurance Company – HMO (new for 1997)	D	COM-MC
36	United Healthcare Insurance Company - PPO (new for 1997)	D	COM-MC
37	HCHP-Pilgrim HMO (integrated product)	8	HMO
38	Health new England Select (self-funded)	8	HMO
39	Pilgrim Direct	8	HMO
40	Kaiser Foundation	8	HMO
41	Invalid (replaced by #157)		
42	ConnectiCare of Massachusetts	8	HMO
43	MEDTAC	8	HMO
44	Community Health Plan	8	HMO
45	Health Source New Hampshire	8	HMO
46	Blue ChiP (BCBS Rhode Island)	8	HMO
47	Neighborhood Health Plan	8	HMO
48	US Healthcare	8	HMO
49	Healthsource CMHC Plus PPO	E	PPO
50	Blue Health Plan for Kids	6	BCBS
51	Aetna Life Insurance	7	COM
52	Boston Mutual Insurance	7	COM
53	Invalid (no replacement)		
54	Continental Assurance Insurance	7	COM
55	Guardian Life Insurance	7	COM
56	Hartford L&A Insurance	7	COM
57	John Hancock Life Insurance	7	COM
58	Liberty Life Insurance	7	COM
59	Lincoln National Insurance	7	COM
60	Invalid (replaced by #97)		
61	Invalid (replaced by #96)		
62	Mutual of Omaha Insurance	7	COM
63	New England Mutual Insurance	7	COM
64	New York Life Care Indemnity (New York Life Insurance)	7	COM
65	Paul Revere Life Insurance	7	COM

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
66	Prudential Insurance	7	COM
67	First Allmerica Financial Life Insurance	7	COM
68	Invalid (replaced by #96)		
69	Corporate Health Insurance Liberty Plan	7	COM
70	Union Labor Life Insurance	7	COM
71	ADMAR	E	PPO
72	Healthsource New Hampshire	7	COM
73	United Health and Life (subsidiary of United Health Plans of NE)	7	COM
74	United Healthcare Insurance Company	7	COM
75	Prudential Healthcare HMO	D	COM-MC
76	Invalid (replaced by #270)		
77	Options for Healthcare PPO	E	PPO
78	Phoenix Preferred PPO	D	COM-MC
79	Pioneer Health Care PPO	E	PPO
80	Tufts Total Health Plan PPO	E	PPO
81	HMO Blue	C	BCBS-MC
82	John Hancock Preferred	D	COM-MC
83	US Healthcare Quality Network Choice - PPO	E	PPO
84	Private Healthcare Systems PPO	E	PPO
85	Liberty Mutual	7	COM
86	United Health & Life PPO (subsidiary of United Health Plans of NE)	E	PPO
87	CIGNA PPO	D	COM-MC
88	Freedom Care	E	PPO
89	Great West/NE Care	7	COM
90	Healthsource Preferred (self-funded)	E	PPO
91	New England Benefits	7	COM
92	Invalid (replaced by #84, 166, 184)		
93	Psychological Health Plan	E	PPO
94	Time Insurance Co	7	COM
95	Pilgrim Select - PPO	E	PPO
96	Metrahealth (United Health Care of NE)	7	COM
97	Unicare	7	COM

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
98	Healthy Start	9	FC
99	Other POS (not listed elsewhere) ***	J	POS
100	Transport Life Insurance	7	COM
101	Quarto Claims	7	COM
102	Wausau Insurance Company	7	COM
103	Medicaid (includes MassHealth)	4	MCD
104	Medicaid Managed Care-Primary Care Clinician (PCC)	B	MCD-MC
105	Invalid (replaced by #111)		
106	Medicaid Managed Care-Central Mass Health Care	B	MCD-MC
107	Medicaid Managed Care-Community Health Plan	B	MCD-MC
108	Medicaid Managed Care-Fallon Community Health Plan	B	MCD-MC
109	Medicaid Managed Care-Harvard Community Health Plan	B	MCD-MC
110	Medicaid Managed Care-Health New England	B	MCD-MC
111	Medicaid Managed Care-HMO Blue	B	MCD-MC
112	Medicaid Managed Care-Kaiser Foundation Plan	B	MCD-MC
113	Medicaid Managed Care-Neighborhood Health Plan	B	MCD-MC
114	Medicaid Managed Care-United Health Plans of NE (Ocean State Physician's Plan)	B	MCD-MC
115	Medicaid Managed Care-Pilgrim Health Care	B	MCD-MC
116	Medicaid Managed Care-Tufts Associated Health Plan	B	MCD-MC
117	Invalid (no replacement)		
118	Medicaid Mental Health & Substance Abuse Plan – Mass Behavioral Health Partnership	B	MCD-MC
119	Medicaid Managed Care Other (not listed elsewhere) ***	B	MCD-MC
120	Out-Of-State Medicaid	5	GOV
121	Medicare	3	MCR
122	Invalid (replaced by #234)		
123	Invalid (no replacement)		
124	Invalid (replaced by #222)		
125	Medicare HMO – Fallon Senior Plan	F	MCR-MC
126	Invalid (replaced by #230)		
127	Medicare HMO – Health New England Medicare Wrap **	F	MCR-MC
128	Medicare HMO – HMO Blue for Seniors **	F	MCR-MC
129	Medicare HMO – Kaiser Medicare Plus Plan	F	MCR-MC

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
130	Invalid (replaced by #232 and 233)		
131	Medicare HMO – Pilgrim Enhance 65 **	F	MCR-MC
132	Medicare HMO – Matthew Thornton Senior Plan		MCR-MC
133	Medicare HMO – Tufts Medicare Supplement (TMS)	F	MCR-MC
134	Medicare HMO – Other (not listed elsewhere)	F	MCR-MC
135	Out-Of-State Medicare	3	MCR
136	BCBS Medex **	6	BCBS
137	AARP/Medigap Supplement **	7	COM
138	Banker's Life and Casualty Insurance **	7	COM
139	Bankers Multiple Line **	7	COM
140	Combined Insurance Company of America **	7	COM
141	Other Medigap (not listed elsewhere) ***	7	COM
142	Blue Cross Indemnity	6	BCBS
143	Free Care	9	FC
144	Other Government	5	GOV
145	Self-Pay	1	SP
146	Worker's Compensation	2	WOR
147	Other Commercial (not listed elsewhere) ***	7	COM
148	Other HMO (not listed elsewhere) ***	8	HMO
149	PPO and Other Managed Care (not listed elsewhere) ***	E	PPO
150	Other Non-Managed Care (not listed elsewhere) ***	0	OTH
151	CHAMPUS	5	GOV
152	Foundation	0	OTH
153	Grant	0	OTH
154	BCBS Other (not listed elsewhere) ***	6	BCBS
155	Blue Cross Managed Care Other (not listed elsewhere) ***	C	BCBS-MC
156	Out of State BCBS	6	BCBS
157	Metrahealth – PPO (United Health Care of NE)	D	COM-MC
158	Metrahealth – HMO (United Health Care of NE)	D	COM-MC
159	None (valid only for secondary source of payment)	N	NONE
160	Blue Choice (includes Healthflex Blue) - POS	C	BCBS-MC
161	Aetna Managed Choice POS	D	COM-MC
162	Great West Life POS	D	COM-MC

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
163	United Healthcare Insurance Company – POS (new for 1997)	D	COM-MC
164	Healthsource CMHC Plus POS	J	POS
165	Healthsource New Hampshire POS (self-funded)	J	POS
166	Private Healthcare Systems POS	J	POS
167	Fallon POS	J	POS
168	Reserved		
169	Kaiser Added Choice	J	POS
170	US Healthcare Quality POS	J	POS
171	CIGNA POS	D	COM-MC
172	Metrahealth – POS (United Health Care NE)	D	COM-MC
173-180	Reserved		
181	First Allmerica Financial Life Insurance EPO	D	COM-MC
182	Unicare Preferred Plus Managed Access EPO	D	COM-MC
183	Pioneer Health Care EPO	K	EPO
184	Private Healthcare Systems EPO	K	EPO
185-198	Reserved		
199	Other EPO (not listed elsewhere) ***	K	EPO
200	Hartford Life Insurance Co **	7	COM
201	Mutual of Omaha **	7	COM
202	New York Life Insurance **	7	COM
203	Principal Financial Group (Principal Mutual Life)	7	COM
204	Christian Brothers Employee	7	COM
207	Network Health (Cambridge Health Alliance MCD Program)	B	MCD-MC
208	HealthNet (Boston Medical Center MCD Program)	B	MCD-MC
205-209	Reserved		
210	Medicare HMO – Pilgrim Preferred 65 **	F	MCR-MC
211	Medicare HMO – Neighborhood Health Plan Senior Health Plus **	F	MCR-MC
212	Medicare HMO – Healthsource CMHC Central Care Supplement **	F	MCR-MC
213-219	Reserved		
220	Medicare HMO – Blue Care 65	F	MCR-MC
221	Medicare HMO – Harvard Community Health Plan 65	F	MCR-MC
222	Medicare HMO – Healthsource CMHC	F	MCR-MC

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
223	Medicare HMO – Harvard Pilgrim Health Care of New England Care Plus	F	MCR-MC
224	Medicare HMO – Tufts Secure Horizons	F	MCR-MC
225	Medicare HMO – US Healthcare	F	MCR-MC
2236-229	Reserved		
230	Medicare HMO – HCHP First Seniority	F	MCR-MC
231	Medicare HMO – Pilgrim Prime	F	MCR-MC
232	Medicare HMO – Seniorcare Direct	F	MCR-MC
233	Medicare HMO – Seniorcare Plus	F	MCR-MC
234	Medicare HMO – Managed Blue for Seniors	F	MCR-MC
235-249	Reserved		
250	CIGNA HMO	D	COM-MC
251	Healthsource CMHC HMO	8	HMO
252-269	Reserved		
270	UniCare Preferred Plus PPO	D	COM-MC
271	Hillcrest HMO	8	HMO
272	Auto Insurance	T	AI
990	Free Care – co-pay, deductible, or co-insurance (when billing for free care services use #143)	9	FC

** Supplemental Payer Source

*** Please list under the specific carrier when possible

APPENDIX H
NUMERICAL SOURCE OF PAYMENT LIST
Effective October 1, 1997

SUPPLEMENTAL PAYER SOURCES
USE AS SECONDARY PAYER SOURCE ONLY

SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
127	Medicare HMO – Health New England Medicare Wrap	F	MCR-MC
128	Medicare HMO – HMO Blue for Seniors	F	MCR-MC
129	Medicare HMO – Kaiser Medicare Plus Plan	F	MCR-MC
131	Medicare HMO – Pilgrim Enhance 65	F	MCR-MC
133	Medicare HMO – Tufts Medicare Supplement (TMS)	F	MCR-MC
136	BCBS Medex	6	BCBS
137	AARP/Medigap Supplement	7	COM
138	Banker's Life & Casualty Insurance	7	COM
139	Bankers Multiple Line	7	COM
140	Combined Insurance Company of America	7	COM
141	Other Medigap (not listed elsewhere) ***	7	COM
200	Hartford Life Insurance Co.	7	COM
201	Mutual of Omaha	7	COM
202	New York Life Insurance Company	7	COM
210	Medicare HMO – Pilgrim Preferred 65	F	MCR-MC
211	Neighborhood Health Plan Senior Health Plus	F	MCR-MC
212	Medicare HMO – Healthsource CMHC Central Care Supplement	F	MCR-MC

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**APPENDIX I. MERGERS, NAME CHANGES, CLOSURES, CONVERSIONS,
AND NON-ACUTE CARE HOSPITALS**

MERGERS

ORIGINAL ENTITIES	NAME OF NEW ENTITY	DATE
Berkshire Medical Center Hillcrest Hosp. & Fairview Hosp.	Berkshire Health System	July 1996
Beth Israel Hospital N.E. Deaconess Hospital	Beth Israel Deaconess Medical Center	October 1996
Boston University Medical Center Boston City Hospital Boston Specialty/Rehab	Boston Medical Center Corporation	July 1996
Cambridge Hospital Somerville Hospital	Cambridge Health Alliance – As of July 2001, included Cambridge, Somerville, Whidden, & Malden’s 42 Psych beds. Malden now closed. Please note that Cambridge & Somerville submitted data separately in the past. This year they are submitting under one name. In future years, they may use the Facility Site Number to identify each individual facility’s discharges.	July 1996
Hallmark Health – Malden Hospital	Cambridge Health Alliance – Malden’s 42 Psych beds	April 2001 – Now Closed
Hallmark Health – Whidden Memorial Hospital	Cambridge Health Alliance – Whidden Memorial	July 2001
Cape Cod Hospital Falmouth Hospital	Cape Cod Health Systems	January 1996
Cardinal Cushing General Hospital Goddard Memorial Hospital	Good Samaritan Medical Center	October 1993
Lawrence Memorial Hospital, Malden Hospital, and Unicare Health Systems (Melrose-Wakefield and Whidden Memorial Hospital)	Hallmark Health Systems, Inc. – As of July 2001 included just Lawrence Memorial and Melrose Wakefield	October 1997
Burbank Hospital & Leominster Hospital	Health Alliance, Inc.	November 1994

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**APPENDIX I. MERGERS, NAME CHANGES, CLOSURES, CONVERSIONS,
AND NON-ACUTE CARE HOSPITALS**

MERGERS

ORIGINAL ENTITIES	NAME OF NEW ENTITY	DATE
Holden District Hospital Worcester Hahnemann Hospital Worcester Memorial Hospital	Medical Center of Central Massachusetts	October 1989
Mercy Hospital Providence Hospital	Sisters of Providence	June 1997
Leonard Morse Hospital Framingham Union Hospital	MetroWest Medical Center	January 1992
Beverly Hospital Addison Gilbert Hospital	Northeast Health Systems	October 1996
Salem Hospital North Shore Children's Hospital	North Shore Medical Center	April 1988
St. John's Hospital St. Joseph's Hospital	Saints Memorial Medical Center	October 1992
Charlton Memorial Hospital St. Luke's Hospital Tobey Hospital	Southcoast Health Systems	June 1996
Memorial Health Care University of Mass. Medical Center	UMass. / Memorial Medical Center	April 1999
Melrose-Wakefield Hospital Whidden Memorial Hospital	Unicare Health Systems	July 1996

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AND NON-ACUTE CARE HOSPITALS**

NAME CHANGES

ORIGINAL ENTITIES	NAME OF NEW ENTITY	DATE
Beth Israel Hospital New England Deaconess Hospital	Beth Israel Deaconess Medical Center	
Boston City Hospital University Hospital	Boston Medical Center – Harrison Avenue Campus	
New England Memorial Hospital	Boston Regional Medical Center	Now Closed.
Cambridge Hospital Somerville Hospital	Cambridge Health Alliance – now includes Cambridge, Somerville & Whidden	
Hallmark Health Systems – Malden & Whidden	Cambridge Health Alliance – Malden & Whidden	Malden now closed.
Cape Cod Hospital Falmouth Hospital	Cape Cod Health Care Systems	
Cardinal Cushing Hospital Goddard Memorial Hospital	Caritas Good Samaritan Medical Center	
Norwood Hospital Southwood Hospital Good Samaritan Med. Ctr.	Caritas Norwood, Caritas Southwood, Caritas Good Samaritan Medical Center	
St. Elizabeth's Medical Center	Caritas St. Elizabeth's Medical Center	
Lawrence Memorial Hospital Melrose-Wakefield Hospital	Hallmark Health Lawrence Memorial Hospital & Hallmark Health Melrose-Wakefield Hospital	

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**APPENDIX I. MERGERS, NAME CHANGES, CLOSURES, CONVERSIONS,
AND NON-ACUTE CARE HOSPITALS**

NAME CHANGES

ORIGINAL ENTITIES	NAME OF NEW ENTITY	DATE
Bon Secours Hospital	Holy Family Hospital	
Vencor Hospitals – Boston & North Shore	Kindred Hospitals – Boston & North Shore	
Lahey Hitchcock Clinic	Lahey Clinic Hospital	
Framingham Union Hospital Leonard Morse Hospital / Columbia MetroWest Medical Center	MetroWest Medical Center – Framingham Union Hospital & Leonard Morse Hospital	
Haverhill Municipal (Hale) Hospital	Merrimack Valley Hospital	Essent Health Care purchased this facility in September 2001
Beverly Hospital Addison Gilbert Hospital	Northeast Health Systems	
Salem Hospital North Shore Children's Hospital	North Shore Medical Center - Salem	
Union Hospital	North Shore Medical Center - Union	
Quincy City Hospital	Quincy Hospital	
Charlton Memorial Hospital St. Luke's Hospital Tobey Hospital	Southcoast Health Systems	

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**APPENDIX I. MERGERS, NAME CHANGES, CLOSURES, CONVERSIONS,
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NAME CHANGES

ORIGINAL ENTITIES	NAME OF NEW ENTITY	DATE
Clinton Hospital	UMass. Memorial – Clinton Hospital	
Health Alliance Hospital	UMass. Memorial – Health Alliance Hospital	
Marlborough Hospital	UMass. Memorial – Marlborough Hospital	
Wing Memorial Hospital	UMass. Memorial – Wing Memorial Hospital	
UMass. Medical Center	UMass. Memorial Medical Center	

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**APPENDIX I. MERGERS, NAME CHANGES, CLOSURES, CONVERSIONS,
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CLOSURES

HOSPITAL	COMMENTS
Amesbury Hospital	Closed.
Boston Regional Hospital	Closed.
Burbank Hospital	Closed.
Cable Emergency Center	Closed.
Goddard Hospital	Closed.
Hunt Memorial Hospital	Closed. Now outpatient services only.
Ludlow Hospital	Closed.
Lynn Hospital	Closed.
Mary Alley Hospital	Closed.
Massachusetts Osteopathic Hospital	Closed.
Medical Center of Symmes	Closed.
St. Luke's Hospital in Middleborough	Closed.
St. Margaret's Hospital for Women	Closed.
Worcester City Hospital	Closed.

NOTE: Subsequent to closure, some hospitals may have reopened for used other than an acute hospital (e.g., health care center, rehabilitation hospital, etc.)

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**APPENDIX I. MERGERS, NAME CHANGES, CLOSURES, CONVERSIONS,
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CONVERSIONS & NON-ACUTE CARE HOSPITALS

HOSPITAL	COMMENTS
Fairlawn Hospital	Converted to non-acute care hospital
Heritage Hospital	Converted to non-acute care hospital
Vencor – Kindred Hospital Boston	Non-acute care hospital
Vencor – Kindred Hospital – North Shore	Non-acute care hospital